

RHODE ISLAND DEPARTMENT OF HEALTH
PREVENTION OF PERINATAL HEPATITIS B AND C VIRUS
SCREENING AND REFERRAL GUIDELINES FOR PREGNANT WOMEN AND NEWBORNS

HEPATITIS B VIRUS (HBV)
RECOMMENDED ACTIONS FOR PRENATAL PROVIDERS

Screen all pregnant women for hepatitis B surface antigen (HBsAg) in the first trimester of each pregnancy.

Repeat testing during late pregnancy for HBsAg-negative women who are at high risk of HBV infection, including:

- Injection drug users
- Women with intercurrent sexually transmitted disease
- Women with multiple sex partners

Report HBsAg-positive pregnant women to the Perinatal Hepatitis Prevention Program at (401) 222-5921 for case management services.

Counsel infected women to reduce risk and prevent further transmission.

Refer HBsAg-positive pregnant women to gastroenterologist of your choice or to:

Women & Infants, Center for
Women’s Gastrointestinal Disorders
100 Dudley Street, Suite 3
Providence, RI 02905
(401) 453-7953

INFANTS BORN TO HBsAg-POSITIVE WOMEN
RECOMMENDED ACTIONS FOR PEDIATRIC PROVIDERS

Prophylaxis and Vaccination

- Give infant (including preterm infants) hepatitis B immune globulin (HBIG) and hepatitis B vaccine within 12 hours of birth.
- Complete hepatitis vaccine series at 6 months of age. Note: Following birth dose, RI infants will receive Pediarix (combination DTaP-IPV-Hep B) at 2, 4, and 6 months for a total of 4 doses of Hep B vaccine.

Post-vaccination Testing

- Test infant for HBsAg (infection) and anti-HBs (immunity) between 9 and 12 months of age (3 to 6 months after 3rd dose) to ensure immunity.
- If infant is HBsAg-negative and anti-HBs-positive, no further treatment is needed.
- If infant is HBsAg-positive (infected), repeat test in 6 months to determine chronic infection.
- If infant is HBsAg-negative and anti-HBs-negative, repeat hepatitis B vaccine series.

Report HBsAg-positive infants to the Rhode Island Department of Health at (401) 222-5921.

Refer HBsAg-positive infants for treatment to the Pediatric Liver Clinic at Hasbro Children’s Hospital at (401) 444-6191.

Adoptees

Screen all internationally adopted children for:

- Hepatitis B surface antigen (HBsAg)
- Hepatitis B surface antibody (anti-HBs)
- Hepatitis B core antibody (anti-HBc)

HEPATITIS C VIRUS (HCV)
RECOMMENDED ACTIONS FOR PRENATAL PROVIDERS

Screen pregnant women at high risk for HCV infection, including:

- Current or former injection drug users
- Recipients of blood products before July 1992
- Recipients of a solid organ transplant before July 1992
- Women receiving long-term hemodialysis
- Recipients of clotting factor concentrates produced before 1987
- Women with persistently abnormal ALT concentrations
- Recipients of IGIV (Gamagard) between January 1,1993 and February 24, 1994.

Also consider prenatal testing for:

- Women with multiple sex partners
- Women with partners with HCV infection
- Women with history of STDs

Report HCV–positive pregnant women to the Perinatal Hepatitis Prevention Program at (401) 222-5921 for case management services.

Counsel infected women to reduce risk and prevent further transmission.

Refer HCV–positive pregnant women to gastroenterologist of your choice or to:

Women & Infants, Center for
Women’s Gastrointestinal Disorders
100 Dudley Street, Suite 3
Providence, RI 02905
(401) 453-7953

INFANTS BORN TO HCV-POSITIVE WOMEN
RECOMMENDED ACTIONS FOR PEDIATRIC PROVIDERS

Test infants born to HCV-positive women:

- Perform RT-PCR assay for HCV RNA once after 3 months of age.
- Test for anti-HCV on or after 18 months of age (maternal antibody may be present up to 18 months of age).

Note: If you choose to refer for testing, you may contact the Pediatric Liver Clinic at Hasbro Children’s Hospital at (401) 444-6191.

Report HCV-positive infants to the Rhode Island Department of Health at (401) 222-5921.

Refer HCV-positive infants for treatment to the Pediatric Liver Clinic at Hasbro Children’s Hospital at (401) 444-6191.

Adoptees

Screen internationally adopted children from China, Russia, Eastern Europe, and Southeast Asia.